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Mental health education for nurses in general practice

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Recommended Citation

Godwin, Kathryn: Mental health education for nurses in general practice 2009, 37-37.
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Mental health education for nurses in general practice

Abstract

Over the last seven years practice nurse numbers have grown across Australia to over 7,824 (est.) in 2007, with at least 60% of general practices now employing a practice nurse (APNA 2008). Nurses have helped many GPs with overwhelming workloads which include dealing with complex mental health complaints, such as depression and anxiety related to chronic disease conditions. Practice nurses are a key component in primary health care with one nurse to every 2.3 GPs in 2007 (APNA 2008).

Keywords

general, practice, nurses, education, mental, health

Disciplines

Arts and Humanities | Life Sciences | Medicine and Health Sciences | Social and Behavioral Sciences

Publication Details

Godwin, K. (2009). Mental health education for nurses in general practice. *Australian Nursing Journal*, 17 (3), 37-37.

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INDIGENOUS HEALTH a time for action

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Time to deliver
for aged care in
Budget 2010.

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Message to my MP:
**Time to deliver
for aged care in
Budget 2010.**

editorial

BY **GED KEARNEY**
ANF FEDERAL SECRETARY

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THE AUSTRALIAN NURSING JOURNAL IS
PUBLISHED MONTHLY BY GERARDINE KEARNEY,
AUSTRALIAN NURSING FEDERATION FEDERAL
SECRETARY.

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CATHY BEADNELL

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DESIGN AND PRODUCTION

MARY CALLAHAN DESIGN PTY LTD
LA BELLA DESIGN

PRINTING

Webstar, Silverwater, NSW.

The Australian Nursing Journal is delivered free monthly to members of ANF Branches other than New South Wales, Queensland and Western Australia. Subscription rates are available on (03) 9602 8500. Nurses who wish to join the ANF should contact their state branch. The statements or opinions expressed in the journal reflect the views of the authors and do not represent the official policy of the Australian Nursing Federation unless this is so stated. Although all accepted advertising material is expected to conform to the ANF's ethical standards, such acceptance does not imply endorsement. All rights reserved. Material in the Australian Nursing Journal is copyright and may be reprinted only by arrangement with the Australian Nursing Federation Federal Office.

Note: ANJ is indexed in the CUMULATIVE INDEX to NURSING AND ALLIED HEALTH LITERATURE and the INTERNATIONAL NURSING INDEX. ISSN 1320-3185

Time to deliver for aged care in Budget 2010

The ANF has launched the second phase of the **because we care** campaign with the distribution of postcards addressed to key Ministers and Senators to ensure the aged care sector gets a funding boost in Budget 2010. We want improved working conditions and quality of care in residential settings. Please sign and put a stamp on the postcard you will receive in this issue of the journal and drop it in your local post box.

This campaign is vital to achieving wage parity and safe staffing levels and skills mix for our nursing and assistants in nursing colleagues in aged care. The federal government must recognise the need to attract and retain valuable and qualified staff in aged care by funding it properly and making providers accountable for allocating increased funding to wages.

ANF assistant federal secretary Lee Thomas and I joined our nursing colleagues in Sydney recently offering free blood pressure checks to ALP conference delegates. The purpose of the exercise was to highlight the pressure facing the aged care sector and the inequities nurses and carers endure, despite providing often complex care to older, vulnerable residents.

I attended the ALP conference and witnessed the positive role unions play in respectfully and responsibly negotiating issues of importance to their members. The ANF highlighted important issues in aged care and health. I delivered a speech and moved a motion to

support the health platform of the ALP and raised aged care as an issue of importance to many delegates. Gay Hawksworth, secretary of the Queensland Nurses Union (QNU, ANF Queensland Branch) also made an important contribution to the debate on behalf of nurses and midwives.

Our efforts at the conference saw aged care moved from the Social Inclusion Chapter to the Health Care Chapter. This was an important achievement as aged care is now incorporated as a health issue in ALP policy discussions.

Many of you will be aware that there is a national OHS harmonisation process underway and an article in the journal this month invites nurses to contribute to the debate. I seconded a motion at the ALP conference requesting further discussion on the issue so that the harmonisation process doesn't undermine the work the ANF has done to ensure nurses have safe and healthy work environments.

The feature article this month follows up on developments in Indigenous health and reveals the need for ongoing and greater efforts in closing the gap in health care outcomes for Indigenous people. There is a lot of good work being done in communities which is cause for celebration but much remains to be done.

Mental health is the topic for this month's focus section and it is great to hear about the wonderful work being done by nurses in this area. Nurses continue, in very difficult circumstances, to develop and improve the care provided to people experiencing mental health issues. There are some great projects underway in many states around the country, through universities and nursing led research aimed at improving services and the quality of care in mental health.

As I mentioned at the outset, we are now calling on all of our colleagues in nursing to support the **because we care** campaign by sending off a postcard to the relevant Minister (postcards are addressed for convenience) supporting the call to '...deliver for aged care in Budget 2010'. You can also visit the website at www.becausewecare.org.au and request more postcards to distribute in your workplace and to friends and family. This campaign is not only about the current generation of people requiring care but future generations who will require residential aged care. Please help us achieve a decent and just aged care sector, for nurses, assistants in nursing and older Australians who rely on these services, by supporting the campaign.

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If you are a financial member of the ANF, QNU or NSWNA, you can transfer your membership by phoning your union branch. Don't take risks with your ANF membership – transfer to the appropriate branch for total union cover. It is important for members to consider that nurses who do not transfer their membership are probably not covered by professional indemnity insurance. Telephone your branch membership section using the numbers above.

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Mental health education for nurses in general practice

BY KATHY GODWIN

Over the last seven years practice nurse numbers have grown across Australia to over 7,824 (est.) in 2007, with at least 60% of general practices now employing a practice nurse (APNA 2008). Nurses have helped many GPs with overwhelming workloads which include dealing with complex mental health complaints, such as depression and anxiety related to chronic disease conditions. Practice nurses are a key component in primary health care with one nurse to every 2.3 GPs in 2007 (APNA 2008).

My experience as a registered nurse working in a rural general practice has provided great job satisfaction. I have a good rapport and trusting relationships with most patients. However, practice nurses work with clients who have psychological and emotional issues associated with long-term debilitating chronic disease or acute depression and anxiety. Many nurses are not necessarily prepared for all aspects of the role and this could be related to the limited exposure in previous nursing experience.

Despite being a rural practice nurse for over seven years I am expected to provide psychological support, particularly as I have developed a strong rapport and elicited the trust of the patients over prolonged periods of care. Research in Australia (2002) has identified that close community bonds are evident in rural areas as rural nurses reside in the same community for long periods of time.

What practice nurses need is continuing educational opportunities in mental health to practice confidently within their scope of practice. Existing limited opportunities could be extended to include courses such as Mental Health First Aid. I have really enjoyed the online education opportunities such as

the two mental health modules offered for free through the Australian Practice Nurse Association website, which has provided me with some confidence to deliver effective nursing care. I encourage all practice nurses to be proactive in seeking educational opportunities in mental health nursing to provide optimal care for their patients.

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Mental health triage pivotal

BY NATISHA SANDS

The Mental Health Triage Education Program (MHTEP) is a cross disciplinary clinical education program that provides an evidenced based framework for conducting mental health assessment at point of entry to public mental health services. Mental health triage is pivotal to the framework for mental health service delivery in Australia. The practice involves assessment across the lifespan, categorising urgency, and determining optimal acute mental health problems.

The aim of the program is to provide clinicians with the requisite skills and knowledge to support accurate clinical decision-making. The program is underpinned by approaches that emphasise quality, safety, and equity of access.

The program includes content on mental health triage telephone assessment skills, categorising urgency using triage scales, risk assessment and management, medico legal issues, decision-making frameworks for practice, crisis theory/managing crisis, effective triage documentation, engaging consumers and carers, and a summary of best research evidence for mental health triage practice.

Prior to its inception in 2007 there was no specialised, evidence based education available in Australia to support clinicians in practice. The MHTEP was developed from the author's PhD research, and originally piloted at The Alfred Hospital, Melbourne before being offered at the University of Melbourne (UoM) in 2007. Since 2007 the program has been delivered to more than

500 clinicians across Victoria, Tasmania, South Australia and New South Wales, and will be rolled out in Queensland in October 2009.

In 2007 Dr Sands developed a cross disciplinary postgraduate subject at UoM entitled Mental Health Triage and Intake Practice, which drew directly on the content of the MHTEP. To date more than 200 students have completed the subject.

For further information on the program please visit the website at <http://www.nursing.unimelb.edu.au/>

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